

TOPIC	DISCUSSION AND FINDINGS	RECOMMENDATION	FOLLOW-UP/ACTION
Call to Order 4:30 PM	The following members were present on the attached sign-in roster.	A quorum was present and the meeting was called to order.	None.
Introduction(s)			
	None	None	None.
Public Comments			
	Dr. Thomas Marino and dr. Sandra Mondro introduced herself as the new Radiologist. Dr, Sandro mondro is currently being credentialed and pending approval.	None	None.
Minutes			
Meeting Minutes	Approval of December 2, 2019 MEC minutes	None	First Motion: Dr. Carlson Second Motion: Dr. Perezalonso All Approved
Old Business			
Ongoing update on the Initiative to increase EMR notes to 100% and eliminate hand written notes/orders by contracted In-house staff (Peds, Ob, Med).	There are some physicians who are still writing their EMR notes. This will continue to be an ongoing process.	None	Ongoing Process
New Business			
MEC Chief of Staff-Elect - Vacant	All MEC members that attended discussed the qualifications of being the Chief of Staff Elect and the expectations of becoming the Chief of staff in March.	All members of MEC recommended Dr. Gunawardene to become the chief of staff elect and the next chief of staff.	Motion to appoint Dr. Ishan Gunawardene as the new Chief of Staff Elect. Dr. Ishan Gunawardene accepted the position and will begin his position as Chief of Staff elect effective immediately.

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			First Motion: Dr. Padron Second Motion: Dr. Carlson All approved
MEC March 2020 Suggested Date Change	Janet Moreland and Joe-Ann Hyppolite will be coming back from a Conference in San Diego the Sunday prior to the MEC meeting date that is held on March 2, 2020.	Due to the shortage of time, Joe-Ann requested to move the meeting to March 9, 2020 to give her enough time to prepare all MEC reports.	Motion to move MEC from March 2, 2020 to March 9, 2020. First Motion: Dr. Schepke Second motion: Dr. Abu
Report			
Treasurer Report	Amount in PNC account: \$ 78,314.99 Dr. Carlson suggested to change the process of receiving MEC checks from credentialing. She has received checks that has passed the 90 day deposit due date causing to not be able to deposit the checks written to MEC for credentialing purposes.	None	Karen Harris to speak to credentialing on the process in receiving checks for MEC and when they should send checks to dr. Carlson to be deposited in time prior to the 90 day expiration date.
Committee Reports			
CCU Committee	All MEC members were given a copy of the CCU reports and reviewed the November data comparing it to their prior year data.	None.	None.
Department Reports			
Family Residency Report	All MEC members were given the November 2019 GMEC meeting minutes for review. Updates on inpatient peds rotation at St. Mary's Medical Center. Residents have started their pediatric / newborn rotation in December and have increased their pediatric/ newborn numbers. Family Medicine Program Accreditation <ul style="list-style-type: none"> • ACGME FM Program Site Visit: January 29, 2020 Sponsoring is currently Initial Accreditation with Warning	None	None

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	<ul style="list-style-type: none"> Made it to the January Agenda for RC review – Still pending 		
Delinquent Medical Records	Discussed the Delinquent Medical Records report with all members of MEC. Average Monthly Discharge rate has increased from last month to the month of December 2019 with the rate being 2090. There are 42 deficiencies greater than 30 days and all physicians have been set a letter notifying of their delinquent notes.	None	None
Emergency Department Report	Discussed the ED Report for November in MEC packet that is pulled from the EDIS. They have been doing pretty well for turnaround time.	None.	None
Surgery Services report	Dr. Davis provided the surgical procedures comparing Current year 2019 to FY2018 for the month of October.	None	None
OB Services Report	Dr. Carlson reported the October OB reports to all MEC members. OB reported 12 deliveries with 8 vaginal deliveries and 4 C-sections.	None.	None
Chief Medical Officer	<p>QUALITY</p> <p>Review of Sepsis cases for December and discussed with physicians, fallouts or near fallouts.</p> <p>Researched and added National KPI benchmarks to KPI grid for re-credentialing of LMC physicians.</p> <p>SERVICE</p> <p>Reviewed and approved initial-credentialing and re-credentialing packages for all physicians and providers coming to MEC this month for final approval.</p>	None.	None

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	<p>Met with Physicians and Providers to review their Focused Professional Practice Evaluation and discuss their strengths and opportunities for improvement.</p> <p>Added DocuSign to the OPPE/FPPE process to capture signatures for the Locums and Low Volume/No Volume physicians that no longer come to LMC.</p> <p>Red flag for Physician requesting privileges sent to MEC for review.</p> <p>Conference call with Wellington Administration discussing ER transfer from LMC refusal and agreeing to a process to avoid future "miscommunications" by WRMC.</p> <p>Review of Risk Qualls with communication to physicians involved</p> <p>Review of Delinquent Medical Records</p> <p>GROWTH</p> <p>Ongoing discussions and meetings in the development of the Inpatient Detox Unit with possibility of creating a Psych intake/ Baker Act receiving component with the closure of Jerome Golden.</p> <p>Preliminary exploration of possible Family Practice Fellowship Programs with the expected completion of ACGME accreditation in February 2020.</p>		
<p>Risk Management Report</p>	<p>Executive Summary</p> <p>Revising Fall Prevention and Reduction Program</p>	<p>None</p>	<p>None</p>

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	Revising Critical Lab Results Policy and Procedure Revising Documentation Policy and Procedure Mock Trial by Outside Counsel: 2/25/20 Informed Consent Policy and Procedure Hospital Wide Photography and Camera Policy and Procedure Ligature Resistant Rooms completed as of 11/30/19 Education Sequestering of Equipment AMA/Elopement Adoption and Surrogacy Upcoming EMTALA Lunch and Learn CPI Classes IV Workshop and BD Nexiva Diffusics		
Continuous Quality & Patient Safety Improvement Committee Report	All members of MEC received a copy of the Quality and Patient Safety Improvement Plan FY 2019-2020. In keeping with our mission and vision, this Quality and Patient Safety Improvement Plan serves as the foundation of Lakeside Medical Center to continuously improve the quality of treatment and services it provides.		
Director of Nursing Report	QUALITY <ul style="list-style-type: none"> • IV discussion scheduled January 8, 2020 • OB surveys began December 1, there were no complaints, all positive feedback • Case Managers leave information in HMS under the note tab and select discharge planning. In addition, you may call the case 		

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	<p>manager as well. An email sent today regarding this concern</p> <p>SERVICE</p> <ul style="list-style-type: none"> • 2 interviews scheduled for ER Manager and 1 pending <p>GROWTH</p> <ul style="list-style-type: none"> • The Joint Commission (CY 2020 Standards) – action plan being developed and meetings scheduled with staff involved with the standards. • Breastfeeding Coalition meeting on January 7, 2020, at 930am and Elaine Gulley will be attending • We have one patient this month who is breastfeeding only 		
Executive Director	<p>SERVICE</p> <ul style="list-style-type: none"> • Blue Radiology Update – (5 days a week) pending due to credentialing information • Blue Medical (Anesthesia) Update – Contract start date 1/1/2020 • Anesthesiologists Handoff dates – 1/13/2020 & 1/14/2020. Locums ends on 1/15/2020 at 8 a.m. <p>GROWTH</p> <ul style="list-style-type: none"> • Community Needs Assessment – 3 Objectives and Strategies were selected 		

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	<ul style="list-style-type: none"> • Terri Calsetta’s role will change - more community/outreach focus • Lakeside Medical Center - Physical Therapy Campaign • Leadership Glades – December 18, 2019 at Lakeside Medical Center • Room/Office space at Lakeside Medical Center for Aeromedical Pilots • Physical Therapy Campaign to advertise services • Glades Stabilization Unit Update • Lakeside Medical Center Dialysis Outpatient Unit Update • PBSC, Palm Beach County School District and LSMC partnership • Appointment to the Boys and Girls Club Advisory Board 		
<p>Medical Staff Update</p>	<p>A discussion was had about the process of reporting NPDB alerts that arise after a medical staff has been credentialed.</p>		<p>Motion to bring forward NPDB reports that has been alerted to Peer Review Committee. A code to be added on the Peer review report to decide whether it should be brought forward to MEC or if the alert ends at Peer Review meeting. First motion: dr. Scheppke Second motion: Dr. Bohorquez All approved</p>
<p>Closed Session</p>	<p>There was a closed session at 6:45 PM with all physicians that were present.</p>		

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Open Session	MEC meeting was continued the open session at 7:25 PM.		
Adjournment	Meeting adjourned at 7:27 PM Next meeting February 3, 2020		

APPROVED